

ISSUE SLIP STAPLE AREA (for additional cross references)

PORTION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>LS</i>	<i>32</i>	<i>4/29</i>
FORMALITY REVIEW	<i>H-T</i>	<i>913</i>	<i>05/04/01</i>
RESPONSE FORMALITY REVIEW	<i>SG</i>	<i>1077</i>	<i>8/8/01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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*5/7*  
*2831*  
*0820*  
*08-08-01*